

Slate Mailer Organization Campaign Statement

(Government Code Sections 84218-84219)

Type or print in ink.

COVER PAGE

SEE INSTRUCTIONS ON REVERSE

Statement Covers Period

from 01/01/2009

through 06/30/2009

Date Stamp

CALIFORNIA
1992 FORM 401

1/6

FOR OFFICIAL USE ONLY

I Slate Mailer Organization Information

FULL NAME OF SLATE MAILER ORGANIZATION:

Orange County Republican Leadership Voter Guid -
e

ID NUMBER

1285120

ADDRESS NO AND STREET

CITY STATE ZIP CODE PHONE NUMBER

Laguna Niguel CA 92677

NAME OF TREASURER:

James V Lacy

ADDRESS NO AND STREET

CITY STATE ZIP CODE DAYTIME PHONE NUMBER

Laguna Niguel CA 92677

II Is This A General Purpose Committee?

If this Slate Mailer Organization is also a "general purpose committee" as defined in Government Code Section 82027.5, check box and attach the committee's campaign disclosure report to this statement.

☐

Committee Report
Attached

☐

ID Number if
Recipient Committee

III Summary of Payments

	(A) Total This Period	(B) Cumulative to Date (Since January 1 of calendar year covered)
1 TOTAL PAYMENTS RECEIVED	\$ 15680.00 Sch. A, Line 3	\$ 15680.00
2 TOTAL PAYMENTS MADE	\$ 11714.45 Sch. B, Line 3	\$ 11714.45

IV Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 07/29/2009 At San Juan Capistrano By Barrett Garcia CA
DATE CITY AND STATE SIGNATURE OF RESPONSIBLE OFFICER

Name of Responsible Officer Barrett Garcia CA Title: ATR
TYPE OR PRINT

FOR INFORMATION REQUIRED TO BE PROVIDED TO YOU PURSUANT TO THE INFORMATION PRACTICES ACT OF 1977, SEE

INFORMATION MANUAL ON CAMPAIGN DISCLOSURE PROVISIONS OF THE POLITICAL REFORM ACT FOR SLATE MAILER ORGANIZATIONS.

State of California Fair Political Practices Commission

Schedule A Payments Received

SCHEDULE A

Statement covers period from 01/01/2009 through 06/30/2009	CALIFORNIA 1992 FORM 401
	2/6
I.D NUMBER 1285120	

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NAME OF SLATE MAILER ORGANIZATION:

Orange County Republican Leadership Voter Guide

(1)	(2)	(3)		(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a)	(b)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
		NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER SUPPORT OPPOSE		
02/12/2009 	Amante for Assembly 2010 Rsm Reference No: CA 92688	Jerry Amante State Assembly Person	X	1000.00	1000.00
02/12/2009 	Friends of Jeff Denham Sacramento Reference No: CA 95833	Jeff Denham Lieutenant Governor	X	2500.00	2500.00
02/28/2009 	Gilliard, Blanning, Wysocki & Associates, Inc. Sacramento Reference No: CA 95814	Sandra Hutchens Sheriff-Coroner Orange County	X	2500.00	2500.00

SUBTOTAL

\$

Summary

- Amount Received - Payments of \$100 or More
(Include all Schedule A subtotals) \$ 14452.00
- Amount Received - Payments of Less than \$100
(Not itemized) \$ 1228.00
- Total Payments Received (Line 1 + Line 2) Enter here and in
Column A, Line 1, of the Summary of Payments section on Page 1 \$ 15680.00

Schedule A Payments Received

SCHEDULE A

Statement covers period from 01/01/2009 through 06/30/2009	CALIFORNIA 1992 FORM 401
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NAME OF SLATE MAILER ORGANIZATION:

Orange County Republican Leadership Voter Guide

I.D NUMBER

1285120

(1)	(2)	(3)		(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a)	(b)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
		NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER		
			SUPPORT	OPPOSE	
03/04/2009 	Landslide Communications Laguna Niguel CA 92677 Reference No:	Tom Daly County Supervisor Orange County	X		1000.00 1000.00
03/20/2009 	Debra Carrillo for Superior Court Santa Ana CA 92705 Reference No:	Debra Carrillo Superior Court Judge Orange County	X		1000.00 1000.00
03/20/2009 	Friends for Michelle Steel 2010 Rsm CA 92688 Reference No:	Michelle Steel Board of Education	X		1000.00 1000.00

SUBTOTAL

\$

Summary

- Amount Received - Payments of \$100 or More
(Include all Schedule A subtotals) \$ _____
- Amount Received - Payments of Less than \$100
(Not itemized) \$ _____
- Total Payments Received (Line 1 + Line 2) Enter here and in
Column A, Line 1, of the Summary of Payments section on Page 1 \$ _____

Schedule A Payments Received

SCHEDULE A

Statement covers period from 01/01/2009 through 06/30/2009	CALIFORNIA 1992 FORM 401
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(1)	(2)	(3)		(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a)	(b)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
		NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER		
			SUPPORT OPPOSE		
04/27/2009 	JohnsonClark Associates Sacramento CA 95833-4131 Reference No:	Tom Harman Attorney General	X	2500.00	2500.00
05/19/2009 	Taxpayers for Jesse Petrilla Rsm CA 92688 Reference No:	Jesse Petrilla City Council Member Rancho Santa Margarita	X	452.00	452.00
06/25/2009 	Villines for Insurance Commissione - r Fresno CA 93721 Reference No:	Mike Villines Insurance Commissioner	X	2500.00	2500.00

SUBTOTAL

\$ 14452.00

Summary

- Amount Received - Payments of \$100 or More
(Include all Schedule A subtotals) \$ _____
- Amount Received - Payments of Less than \$100
(Not itemized) \$ _____
- Total Payments Received (Line 1 + Line 2) Enter here and in
Column A, Line 1, of the Summary of Payments section on Page 1 \$ _____

Schedule B Payments Made

SCHEDULE B

Statement covers period from 01/01/2009 through 06/30/2009	CALIFORNIA 1992 FORM 401
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I.D NUMBER 1285120	

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NAME AND STREET ADDRESS OF PAYEE	DESCRIPTION OF PAYMENT	AMOUNT PAID
Chateau du Sureau Oakhurst CA 93644 Reference No:	Meeting and Appearances	2470.00
Cox Communications Phoenix AZ 85072 Reference No:	Office Expenses	155.51
Barrett Garcia San Juan Capistrano CA 92675 Reference No:	Accounting Services	100.00
James Lacy Laguna Niguel CA 92677 Reference No:	Consulting	3800.00
Landslide Communications Laguna Niguel CA 92677 Reference No:	Consulting	4500.00
STA Campaigns Newport Beach CA 92663 Reference No:	Consulting	623.94

Summary

	SUBTOTAL	\$ 11649.45
1. Payments of \$100 or More (Include all Schedule B subtotals)	\$	11649.45
2. Payments under \$100 This Period (Not itemized)	\$	65.00
3. Total Payments This Period (Line 1 + Line 2). Enter here and in Column A, Line 2, of the Summary of Payments section on Page 1.	\$	11714.45

Schedule C
Persons Receiving
\$1,000 Or More

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1285120

You must identify each individual listed on your Statement of Organization (Form 400) who received, directly or indirectly, \$1,000 or more from the organization during the period. (See instructions on reverse regarding "indirect" payments.)

NAMES OF INDIVIDUALS RECEIVING \$1,000 OR MORE	AMOUNT THIS PERIOD	CUMULATIVE SINCE JANUARY 1
Landslide Communications	4500.00	4500.00